2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010516

Entity Name: RELIN, INC.

FILED Feb 24, 2010 Secretary of State

| Current Principa | al Place of Business: | New Principal Place of Business: |
|------------------|-----------------------|----------------------------------|
| | | |

1089 RED MAPLE WAY

NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

1089 RED MAPLE WAY

NEW SMYRNA BEACH, FL 32168

FEI Number: 59-3732845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONASSON, REYNIR 1089 RED MAPLE WAY

NEW SMYRNA BEACH, FL 32168 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD

Name: JONASSON, REYNIR Address: 1089 RED MAPLE WAY

City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VD

Name: REYNISSON, THORHALLUR H

Address: VIDIGRUND 53

City-St-Zip: 200 KIPAVOGUR, ICELAND, OC

Title:

Name: BJARNASON, GUNNAR O

Address: EIKARASI 4

City-St-Zip: 210 GARDABAER, ICELAND, OC

Title:

Name: REYNISSON, JONAS

Address: GLITVANGI 31

City-St-Zip: 220 HAFNAFJORDUR ICELAND,

Title: [

Name: JONASSON, ELIN Address: 1089 RED MAPLE WAY

City-St-Zip: NEW SMYRNA BEACH, FL 32168

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REYNIR JONASSON PD 02/24/2010